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CONFIRMATION NO. 6645

SERIAL NUMBER 10/824,593	FILING OR 371(c) DATE 04/15/2004 RULE	CLASS 424	GROUP ART UNIT 1615	ATTORNEY DOCKET NO. 109536.159WO1
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APPLICANTS

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**** CONTINUING DATA *******

This application is a CON of PCT/US02/32998 10/17/2002
 which claims benefit of 60/329,529 10/17/2001

**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 06/24/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

26694

TITLE

Methods for treating substance abuse with cholinesterase inhibitors

FILING FEE RECEIVED 1042	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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